ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

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Section 1. Identifying Information

1. Given Name (First Name)  Elizabeth
2. Surname (Last Name)  Inkellis
3. Date  21-September-2017
4. Are you the corresponding author?  Yes ☑ No

5. Manuscript Title
Incidence and Characterization of Major Upper Extremity Amputations in the National Trauma Data Bank

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes ☑ No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the "X" button.

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<td>Resident research grant - recipient</td>
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Are there any relevant conflicts of interest?  Yes ☐ No ☑

Section 4. Intellectual Property -- Patents & Copyrights

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Section 6. Disclosure Statement

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Dr. Inkellis reports and This work was partially funded by a resident research grant from the Orthopaedic Research and Education Foundation.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Christopher

2. Surname (Last Name)  
   Langhammer

3. Date  
   21-September-2017

4. Are you the corresponding author?  
   Yes  
   ✔  
   No

   Corresponding Author’s Name  
   Saam Morshed

5. Manuscript Title  
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**Section 2. The Work Under Consideration for Publication**

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Are there any relevant conflicts of interest?  
   Yes  
   ✔  
   No

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**Section 3. Relevant financial activities outside the submitted work.**

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   No

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**Section 4. Intellectual Property -- Patents & Copyrights**

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   Yes  
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Dr. Langhammer has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Eric
2. Surname (Last Name)  Low
3. Date  21-September-2017

4. Are you the corresponding author?  Yes  No

Corresponding Author’s Name  Saam Morshed

5. Manuscript Title
Incidence and Characterization of Major Upper Extremity Amputations in the National Trauma Data Bank

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   Saam

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   Morshed

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